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33197 7590 07/07/2005

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07/22/2005 WASFAW2 00000136 010885 10802381

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JANET E. MCGHEE (Depositor's Name)
[Signature] (Signature)
JULY 21, 2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10802381	03/17/2004	Jean D.A. Caruthers	D3127 RE	2839

TITLE OF INVENTION: COSMETIC USE OF BOTULINUM TOXIN FOR TREATMENT OF DOWNTURNED MOUTH

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	10/07/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
RUSSEL, JEFFREY E	1654	514-002000

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1. Stout, Uxa, Buyan & Mullins, LLP

2. Frank J. Uxa

3. GREG S. HOLLRIGEL

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(A) NAME OF ASSIGNEE

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/802,381	
	Filing Date	3/17/2004	
	First Named Inventor	Carruthers	
	Group Art Unit	1654	
	Examiner Name	Russel, J.E.	
Total Number of Pages in This Submission	2	Attorney Docket Number	D-3127RE

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) 1. Issue Fee Transmittal PTOL-85, with deposit account authorization, in duplicate.
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	Frank J. Uxa Registration No. 25,612
Signature	
Date	7/21/05

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Typed or printed name	Janet E. McGhee	
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